Rev. 02/02/06

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| OIP  |   |   |   |   | v. 02/02/ |  |  |
|--|---|---|---|---|-----------|--|--|
| FEE TRANSMITTAL  |   |   | Complete if Known   |   |           |  |  |
| For FY 2006  Petent fees are subject to annual revision  |   |   | Application Number:   | 10/616,479                              |           |  |  |
|  |   |   | Filing Date: 7/8/2003   |   |           |  |  |
|  |   |   | First Named Inventor: Thomas M. Mccles  |   |           |  |  |
| <b>3</b>   |   |   | Examiner Name:  | Frederick J. Parker                     | -         |  |  |
| Ve &   |   |   | Group/Art Unit:   | 1762                                    |           |  |  |
| TOTAL OF PAYMENT: \$180  |   |   | Attorney Docket No.: S-100,631  |   |           |  |  |
| METHOD OF PAYMENT (check all that apply)   |   |   | FEE CALCULATION (continued)   |   |           |  |  |
| <ol> <li>The commissioner is hereby authorized to charge indicated fees and credit any over payments to:         Deposit Account Number: 12-2150         Deposit Account Name: Los Alamos National Laboratory         Charge Any Additional Fee Required Under 37 C.F.R. 1.16 and 1.17     </li> </ol> |   | 3. ADE<br>Large<br>Entity<br>Fee Fee<br>Code (\$          | 5) <u>Fee Description</u>   |   | Fee Paid  |  |  |
| FEE CALCULATION  |   |   | Surcharge – late provisional filing fee or cover shee                               |   |           |  |  |
|  |   | 1812 <b>\$2</b> 5   | For filing a request for ree  | examination                             |           |  |  |
| 1. COMBINED FILING FEE Large Entity Small Entity Fee Fee Description Fee Paid  |   | 1251 \$12   | 20 Extension for reply within   | first month                             |           |  |  |
|  |   | 1252 \$4  | 50 Extension for reply within   | Extension for reply within second month |           |  |  |
| 1001 \$300       Basic Filing fee       \$         1004 \$300       Reissue Filing fee       \$         1111 \$500       Search Fee       \$   |   |   | 020 Extension for reply within  | third month                             |           |  |  |
|  |   |   | 590 Extension for reply within  | tension for reply within fourth month   |           |  |  |
| 1311 \$200 Examination Fee \$ 1005 \$200 Provisional Filing Fee 1085 \$250 Provisional Size Fee  |   | 1255 <b>\$2</b> 1   | , ,   | for reply within fifth month            |           |  |  |
|  |   | 1401 \$5  | Notice of Appeal  |   |           |  |  |
| (for each additional 50 sheets that exceeds 100 sheets)  SUBTOTAL (1) \$0  |   |   | 00 Filing a brief in support of   | Filing a brief in support of an appeal  |           |  |  |
|  |   |   | 000 Request for oral hearing  | Request for oral hearing                |           |  |  |
|  |   |   |   | Petition to revive – unavoidable        |           |  |  |
| 2. EXTRA CLAIM FEES/APPLICATION SIZE FEE  Extra Fee from Fee Paid  Claims Below  |   | 1814 <b>\$1</b>   | 10 Terminal Disclaimer  | Terminal Disclaimer                     |           |  |  |
|  |   | 1453 <b>\$15</b>  | 00 Petition to revive – uninter   | to revive – unintentional               |           |  |  |
| Total Claims   |   |   | Petitions to the Director   | Petitions to the Director               |           |  |  |
| Independent<br>Claims  | -3 - ^ - \$   | 1806 \$180 Submission of Information Disclosure Statement |   |   |           |  |  |
| Multiple Dependent X 180 = \$  ** or number previously paid, if greater; For Reissues, see below   |   | 1809 \$7  | Filing a submission after final rejection (37 CFR 1.129 (a))                        |   |           |  |  |
| Large<br>Entity  | ously paid, ii greater, rui Reissdes, see below   | 1810 \$7  | 90 For each additional invent<br>examined (37 C                                     |   |           |  |  |
| Fee  | Fee Description   | 1811 <b>\$1</b> 0   | •   | · V· II                                 |           |  |  |
| 1202 \$50  | Claims in excess of 20  | 1504 \$3  |   |   |           |  |  |
| 1201 \$200 Independent claims in excess of 3<br>1203 \$360 Multiple dependent claim, if not paid.  |   |   | or normal publication/Republication fee  90 Request for Continued Examination (RCE) |   |           |  |  |
| 1204 \$200<br>1205 \$50  | Reissue independent claims in<br>excess of 3 over original patent<br>Reissue claims in excess of 20 |   | ee (specify)  |   |           |  |  |

| SUBMITTED BY  |                   |               | Complete (if applicable) |                |
|---------------|-------------------|---------------|--------------------------|----------------|
| Printed Name: | Bruce H. Cottrell |               | Reg. No.                 | 30,620         |
| Signature:    | Bruet Cottell     | Date: 7/11/06 | Telephone                | (505) 667-9168 |

Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

**SUBTOTAL FROM 1** 

**SUBTOTAL FROM 2** 

**SUBTOTAL FROM 3** 

**TOTAL AMOUNT OF PAYMENT** 

(Enter total amount at top of page)

over original patent

drawings

Size Fee here)

**APPLICATION SIZE FEE** 

1081 \$250

Total Claims Fee \$ 0

For each additional 50 sheets

SUBTOTAL (2) \$ 0 (Include total of Claims Fees and

that exceed 100 sheets,

including specification and

Rev. 06/04/04

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

pplicants:

Thomas M. McCleskey

Docket No.: S-100,631

erial No.:

10/616,479

Examiner:

Frederick J. Parker

Filed

7/8/2003

Art Unit:

1762

For

POLYMER-ASSISTED DEPOSITION OF FILMS

Customer No. 35068

Mail Stop Amendment Commissioner for Patents P. O. Box 1450 Alexandria, VA 22313-1450

## AMENDMENT/RESPONSE

Sir:

In response to the Office Action dated June 15, 2006, please enter the following amendments to the Claims, and consider the accompanying remarks.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 5 of this paper.

## CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8(a)) I hereby certify that this correspondence is, on the date shown below, being: MAILING **FACSIMILE** ☐ transmitted by facsimile to the deposited with the United States Postal Service United States Patent and Trademark Office on the date shown below with sufficient postage as first class mail in an envelope addressed to the: Commissioner for Patents, PO Box 1450,

Alexandria, VA 22313-1450.

Bruce H. Cottrell

Signature

(type or print name of person certifying)